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Jc564 U.S. PTO

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	862.C1861
First Named Inventor or Application Identifier	
ATSUSHI TANAKA, ET AL.	
Express Mail Label No.	

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Specification Total Pages <b>40</b>	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <b>17</b>	
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <b>2</b>	
a. <input type="checkbox"/> Newly executed (original or copy)	
b. <input checked="" type="checkbox"/> Unexecuted for information purposes	
c. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) <b>[Note Box 5 below]</b>	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	

6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. <input type="checkbox"/> Computer Readable Copy
b. <input type="checkbox"/> Paper Copy (identical to computer copy)
c. <input type="checkbox"/> Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
10. <input type="checkbox"/> English Translation Document (if applicable)	
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
12. <input type="checkbox"/> Preliminary Amendment	
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
14. <input type="checkbox"/> Small Entity Statement filed in prior application Statement(s) Status still proper and desired	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No. _____
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## 18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<b>05514</b> (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below	
NAME			
Address			
City	State	Zip Code	
Country	Telephone	Fax	



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	11-20 =	0	X \$ 18.00 =	\$ 0.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b))	3-3 =	0	X \$ 78.00 =	\$ 0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$ 260.00 =	\$ 0.00
				BASIC FEE (37 CFR 1.16(a))	\$ 690.00
	Total of above Calculations =				\$ 690.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$ 690.00

19. Small entity status

- a. ☐ A Small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

20. ☒ A check in the amount of \$ 690.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Scott D. Malpede - Reg. No. 32,533
SIGNATURE	<i>Scott D. Malpede</i>
DATE	March 16, 2000

SDM\cmv